First, Democrats have been correct in saying that to fix health care everybody must be covered. This concept, of course, is known as universal coverage. Republicans, in my view, have been correct in saying there must be more personal responsibility and personal involvement in making health care choices than there is today.

Second, there is a model for fixing health care that every single Senator—every Member of Congress—knows something about. It is the system that serves Members of Congress and their families, offering the Members of this body high-quality, affordable, private health coverage with lots of choice.

Third, America doesn't have health care at all; it has sick care. For example, Medicare Part A will write checks for thousands of dollars so that a senior can be treated in the hospital after they have had a heart attack or a stroke. Medicare Part B—the part of the program that covers outpatient services—provides no incentives for changing the behavior that led to the chronic illness and landed the senior citizen in the hospital. Certainly, it is clear that preventing disease, not just treating disease, must be a bigger part of America's health care future.

Fourth, in my view, you cannot fix American health care if you hurt the middle class who have coverage in order to help those who do not. To fix American health care, you must prove that all Americans have the opportunity to get ahead, starting with their first paycheck under a new health care plan—the Healthy Americans Act that I have drafted and has been posed at my Web site at wyden.senate.gov. Included at this site is a written evaluation of the legislation, done by the Lewin Group. The Lewin Group has been called the gold standard of health care actuarial data.

Their evaluation is clear. Under the Healthy Americans Act, all Americans can be guaranteed a lifetime of private health coverage, at least as good as their Member of Congress receives, for no more than our country spends on health care today. In addition, fixing American health care can be done more quickly than imagined—within 2 years after a reform law is passed—and produce more than \$4 billion in savings in the first year, while expanding coverage.

The next chart is especially important because it shows that the Healthy Americans Act will slow the rate of growth in health care spending by almost \$1.5 trillion over the next 10 years. The distinguished Presiding Officer is an expert in foreign affairs and our policy with Iraq. I am sure that as he looks at the chart, he can see that, according to the Lewin Group, the amount of money that would be saved in slowing the rate of growth in health care spending is several times—three-fold—the amount of money our country has spent on the war in Iraq.

Mr. President, it doesn't take long to explain how the Healthy Americans

Act works. It starts by going where Arnold Schwarzenegger and Mitt Romney would not. It cuts the link between health insurance and employment altogether. Under the Healthy Americans Act, businesses paying for employee health premiums are required to increase their workers' paychecks by the amount they spent last year on their health coverage. Federal tax law is changed to hold the worker harmless for the extra compensation, and the worker is required to purchase private coverage through an exchange in their State that forces insurance companies to offer simplified, standardized coverage, and prohibits them from engaging in price discrimination.

Now, requiring employers to cash out their health premiums, as I propose in the Healthy Americans Act, is good for both employers and workers. With health premiums going up 11 percent this year, employers are going to be glad to be exempt from these increases. With the extra money in their paycheck, workers have a new incentive to shop for their health care and hold down their cost. If a worker in Virginia can save a few hundred dollars on their health care purchase, they can use that money so that one of the constituents of the Presiding Officer can be on their way to Oregon to get in some sensational fishing.

In addition, the Healthy Americans Act is easy to administer and guarantees lifetime health security. Once you have signed up with a plan through an exchange in the State in which you live, that is it; you have completed the administrative process. Even if you lose your job or you go bankrupt, you can never have your coverage taken away. Sign up, and the premium you pay for the plan and all of the administrative activities are handled through the tax system. For those who cannot afford private coverage, the Healthy Americans Act subsidizes their purchases

Businesses that have not been able to afford health coverage for their workers, under the new approach, will pay a fee—one that is tiered to their size and revenue, with some paying as little as 2 percent of the national average premium amount per worker for that basic benefit package. Mike Roach, the owner of the 8-person Paloma clothing firm in Portland, OR, is a 30-year member of the National Federation of Independent Businesses, and he was instrumental in ensuring that this legislation was small business friendly every step of the way.

Mr. President, that is pretty much it, in terms of how the Healthy Americans Act actually works. It will be easy to administer, locally controlled, with guaranteed coverage as good as your Member of Congress gets; and on top of it, there is a model for delivering it that the distinguished Presiding Officer and everybody else in this body knows about. Page 12 of the Lewin report on my Web site shows how the Healthy Americans Act expands cov-

erage for millions of people, guaranteeing health benefits as good as their Member of Congress gets, while saving \$4.5 billion in health spending in the first year. Money is saved by reducing the administrative costs of insurance, reducing cost shifting, and preventing those needless hospital emergency room visits. Also, there are substantial incentives that come about because insurance companies would have to compete for the business of consumers, who would have a new incentive to hold down health costs, which I have already described as the Virginian's opportunity to go fishing in Oregon.

There are other parts of the Healthy Americans Act I wish to describe briefly

As the name of the legislation suggests, I believe strongly that fixing American health care requires a new ethic of health care prevention, a sharp new focus in keeping our citizens well, and trying to keep them from falling victim to skyrocketing rates of increase in diabetes, heart attack, and strokes.

Spending on these chronic illnesses is soaring, and it is especially sad to see so many children and seniors fall victim to these diseases. Yet, many Government programs and private insurance devote most of their attention to treating Americans after they are ill and give short shrift to wellness.

Under the Healthy Americans Act, there will be for the first time significant new incentives for all Americans to stay healthy. They are voluntary incentives, but ones that I think will make a real difference in building a national new ethic of wellness and health care prevention.

Parents who enroll children in wellness programs will be eligible for discounts in their own premiums. Instead of mandating that parents take youngsters to various health programs—and maybe they do and maybe they don't—the Healthy Americans Act says when a parent takes a child to one of those wellness programs, the parent would be eligible to get a discount on the parent's health premiums.

Under the Healthy Americans Act, employers who financially support health care prevention for their workers get incentives for doing that as well. Medicare is authorized to reduce outpatient Part B premiums so as to reward seniors trying to reduce their cholesterol, lose weight, or decrease the risk of stroke. It has never been done before. For example, Part B of Medicare, the outpatient part, doesn't offer any incentives for older Americans to change their behavior. Everybody pays the same Medicare Part B premium right now. The Healthy Americans Act proposes we change that and ensures that if a senior from Virginia or Oregon or elsewhere is involved in a wellness program, in health care prevention efforts, like smoking cessation, they could get a lower Part B premium for doing that.

The preventive health efforts I have described are promoted through new